Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 7/1/11.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	21,683	-36.5%
14. Crop Hail		
15. Other _____ Line of Insurance		

Does filing only apply to certain territory (territories)or certain classes? No.
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): American Alternative Insurance Corporation (AAIC) is submitting the enclosed rate/rule filing. This filing applies to our Self Storage Businessowners Program which is currently on file with your department.

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

American Alternative Insurance Corporation
Name of Company

- Vice President
Official - Title

H29219D

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 08/13/2011.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	$7,035,529	7.9%
14.	Crop Hail		
15.	Other Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: Filing does not only apply to certain territories.
Filing applies to all classes equally except two class codes which do not change.

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):
Please refer to the enclosed Actuarial Memorandum

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

American Economy Insurance Company
Name of Company

Valarie Searles, State Filing Sr. Analyst
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

American Economy Insurance Company

Change in Company's premium or rate level produced by rate revision effective 10/8/2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	72,297	7.0%
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	508,410	7.0%
14. Crop Hail		
15. Other _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Division Five - Loss Cost Multiplier change. ISO loss costs under CF-2007-RLA1 (4/1/08 Ed)

Please see our Exhibit A for a summary of changes.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

American Economy Insurance Company
Name of Company

Judy Hastings, Business Analust II
Official – Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10/01/2011.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	878,314	2.4
14.	Crop Hail		
15.	Other Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: New Exception Page for Medical Payments

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): NA

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

American Automobile Insurance Company
Name of Company

Tracy L. Thompson - Sr. Regulatory Analyst
Official – Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10/01/2011.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	827,055	1.6
14.	Crop Hail		
15.	Other Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: New Rule Page for Medical Payments

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): NA

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

The American Insurance Company
Name of Company

Tracy L. Thompson - Sr. Regulatory Analyst
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

American States Insurance Company

Change in Company's premium or rate level produced by rate revision effective 10/8/2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	231,912	7.0%
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	1,964,623	7.0%
14. Crop Hail		
15. Other _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Division Five - Loss Cost Multiplier change. ISO loss costs under CF-2007-RLA1 (4/1/08 Ed)

Please see our Exhibit A for a summary of changes.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

American States Insurance Company
Name of Company

Judy Hastings, Business Analyst II
Official – Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10/01/2011.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	263,697	0.3
14.	Crop Hail		
15.	Other Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: New Rule Page for Medical Payments

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): NA

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

Associated Indemnity Corporation
Name of Company

Tracy L. Thompson - Sr. Regulatory Analyst
Official – Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 9/1/2011.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	5,081,806	-3.6
14.	Crop Hail		
15.	Other Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Rate revision for Identity Recovery Coverage and Equipment Breakdown and new rate for Condominiums D&O.

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

Capitol Indemnity Corporation
Name of Company

Jennifer Arndt - Product Analyst
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/15/2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	$32,154,713.	+0.36%
14. Crop Hail		
15. Other _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: All territories are being amended. However, only the All Other factors for Motel/Hotel, Apartment and Mercantile are being amended.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are amending the All Other package modification factors for Commercial Multi Peril. Motel/Hotel is being amended for a net increase of 1.22%. Apartments is being amended for a net decrease of 1.33%. Finally, Mercantile is being amended for a net increase of 2.94%. Again, these are only the All Other factors. The combined net effect of all of these changes is a net increase of 0.36%.

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

The Cincinnati Insurance Company - FEIN 31-0542366
Name of Company

Connie Petertonjes - Senior Filings Specialist
Official – Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 09/01/2011.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	$10,831,026	3.9%
14.	Crop Hail		
15.	Other Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: Filing does not only apply to certain territories.

Filing applies to all classes equally except two class codes which do not change.

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):

Please refer to the enclosed Actuarial Memorandum

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Consolidated Insurance Company
Name of Company

Valarie Searles, State Filing Sr. Analyst
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 9/1/11 NB, 11/1/11 RB

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	155,687	9.0%
10. Extended Coverage	Included	
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	4,883,748	8.6%
14. Crop Hail		
15. Other _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Division Five - Loss Cost Multiplier change. ISO loss costs under CF-2007-RLA1 (4/1/08 Ed)

Division Five - Package Mod Change for Industrial & Proc. Please refer to Exhibit A for a summary of changes.

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

Consolidated Insurance Company
Name of Company

Judy Hastings, Business Analyst II
Official – Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10/01/2011.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	1,710,634	2.2
14.	Crop Hail		
15.	Other Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: New Rule Page for Medical Payments

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): NA

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

Fireman's Fund Insurance Company
Name of Company

Tracy L. Thompson - Sr. Regulatory Analyst
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

First National Insurance Company of America

Change in Company's premium or rate level produced by rate revision effective 10/8/2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	93,028	7.0%
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	364,377	7.0%
14. Crop Hail		
15. Other _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Division Five - Loss Cost Multiplier change. ISO loss costs under CF-2007-RLA1 (4/1/08 Ed)

Please see our Exhibit A for a summary of changes.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

First National Insurance Company of America
Name of Company

Judy Hastings, Business Analyst II
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

General Insurance Company of America

Change in Company's premium or rate level produced by rate revision effective 10/8/2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	79,698	7.0%
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	399,998	7.0%
14. Crop Hail		
15. Other _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Division Five - Loss Cost Multiplier change. ISO loss costs under CF-2007-RLA1 (4/1/08 Ed)

Please see our Exhibit A for a summary of changes.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

General Insurance Company of America
Name of Company

Judy Hastings, Business Analyst II
Official – Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 09/01/2011.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	$7,422,965	3.7%
14.	Crop Hail		
15.	Other Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: Filing does not only apply to certain territories.
Filing applies to all classes equally except two class codes which do not change.

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):
Please refer to the enclosed Actuarial Memorandum

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

Indiana Insurance Company
Name of Company

Valarie Searles, State Filing Sr. Analyst
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 9/1/11 NB, 11/1/11 RB

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	149,554	9.0%
10. Extended Coverage	Included	
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	2,828,665	8.8%
14. Crop Hail		
15. Other _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Division Five - Loss Cost Multiplier change. ISO loss costs under CF-2007-RLA1 (4/1/08 Ed)
Division Five - Package Mod Change for Industrial & Proc Please refer to Exhibit A for a summary of changes.

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

Indiana Insurance Company
Name of Company

Judy Hastings, Business Analyst II
Official – Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 06/03/2011.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	23,037 (BOP)	-4.0%
14.	Crop Hail		
15.	Other Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: Yes - Please see Exhibit A for affected class codes

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): We are modifying the class code deviations to add certain Restaurant and Grocery class codes. The percentage changes are enclosed as a supplemental exhibit along with a memorandum for the department's review.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Leading Insurance Group Insurance Co., Ltd (USB)
Name of Company

Yanni Kim, Senior Compliance Analyst
Official – Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10/01/2011.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	1,891,608	2.7
14.	Crop Hail		
15.	Other Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: New Rule Page for Medical Payments

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): NA

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

National Surety Corporation
Name of Company

Tracy L. Thompson - Sr. Regulatory Analyst
Official – Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 09/01/2011.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	$20,515,319	3.7%
14.	Crop Hail		
15.	Other Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: Filing does not only apply to certain territories.
Filing applies to all classes equally except two class codes which do not change.

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):
Please refer to the enclosed Actuarial Memorandum

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

The Netherlands Insurance Company
Name of Company

Valarie Searles, State Filing Sr. Analyst
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 9/1/11 NB, 11/1/11 RB

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	249,127	9.0%
10. Extended Coverage	Included	
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	7,359,492	8.1%
14. Crop Hail		
15. Other _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Division Five - Loss Cost Multiplier change. ISO loss costs under CF-2007-RLA1 (4/1/08 Ed)

Division Five - Package Mod Change for Industrial & Proc Please refer to Exhibit A for a summary of changes.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

The Netherlands Insurance Company
Name of Company

Judy Hastings, Business Analyst II
Official – Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 09/01/2011.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	$13,099,002	8.8%
14.	Crop Hail		
15.	Other Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: Filing does not only apply to certain territories.
Filing applies to all classes equally except two class codes which do not change.

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):
Please refer to the enclosed Actuarial Memorandum

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

Peerless Indemnity Insurance Company,
Name of Company

Valarie Searles, State Filing Sr. Analyst
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 9/1/11 NB, 11/1/11 RB

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	24,665	9.0%
10. Extended Coverage	Included	
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	6,021,582	8.5%
14. Crop Hail		
15. Other _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Division Five - Loss Cost Multiplier change. ISO loss costs under CF-2007-RLA1 (4/1/08 Ed)

Division Five - Package Mod Change for Industrial & Proc Please refer to Exhibit A for a summary of changes.

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will result from application of new rates.

Peerless Indemnity Insurance Company
Name of Company

Judy Hastings, Business Analyst II
Official – Title

Form (RF-3)

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(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	485,610	9.0%
10. Extended Coverage	Included	
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	1,921,902	8.7%
14. Crop Hail		
15. Other _____ (Line of Insurance)		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

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Peerless Insurance Company
Name of Company

Judy Hastings, Business Analyst II
Official – Title